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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/539,031	06/13/2005	Rajagopal Bakthavatchalam	60425(72021)	2029
	7590 03/26/200 NGELL PALMER & D		EXAMINER RAHMANI, NILOOFAR ART UNIT PAPER NUMBER 1625	
P.O. BOX 55874 BOSTON, MA 02205			RAHMANI, NILOOFAR	
bos ion, MA	02203		ART UNIT	PAPER NUMBER
	1625			
			MAIL DATE	DELIVERY MODE
			03/26/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Intonsions Communes	10/539,031	031 BAKTHAVATCHALAM ET AL.	
Interview Summary	Examiner	Art Unit	
	NILOOFAR RAHMANI	1625	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>NILOOFAR RAHMANI</u> .	(3) <u>MARK D. RUSSETT</u> .		
(2) <u>MARGARET D. SEAMAN</u> .	(4)		
Date of Interview: <u>19 March 2008</u> .			
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2	2)∏ applicant's representative	·]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed: <u>NONE</u> .			
Identification of prior art discussed: <u>NONE</u> .			
Agreement with respect to the claims f) was reached. g)⊠ was not reached. h)□ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: Rejections of record have been made. (A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached.	ments which the examiner agopy of the amendments that w	<u>elusioss or chang</u> reed would rende	es have
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INT FILE A STATEMENT OF THE SUBSTANCE OF THE INTERQUIREMENTS ON REVERSE SIDE OF THE SHEET.	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM, '	been filed, APP OAYS FROM T WHICHEVER IS	LICANT IS THIS LATER, TO
	/D. Margaret Seaman/ Primary Examiner, Art Unit 16 Examiner's signature, if requi		

Application No.

Applicant(s)